

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT  
MEDICAL ASSISTANCE PROGRAM

ATTACHMENT 1.1-B

State of ARIZONA

WAIVER(S) OF THE SINGLE STATE AGENCY REQUIREMENT GRANTED UNDER THE INTERGOVERNMENTAL  
COOPERATION ACT OF 1968

Waiver #1.<sup>1/</sup>

NOT APPLICABLE

a. Waiver was granted on \_\_\_\_\_  
(date)

b. The organizational arrangement authorized, the nature and extent of  
responsibility for program administration delegated to  
\_\_\_\_\_, and  
(name of agency)  
the resources and/or services of such agency to be utilized in administration  
of the plan are described below:

<sup>1/</sup> (Information on any additional waivers which have been granted is contained in  
attached sheets.)

TN No. 94-02  
Supersedes  
TN No. None

Approval Date MAR 15 1994

Effective Date January 1, 1994